

**पाटन स्वास्थ्य विज्ञान प्रतिष्ठान सेवाआयोग**  
**प्राज्ञिक सेवा, आकस्मिक तथा जनरल प्राक्टिस समूह, Palliative Care उपसमूह, सहायक प्राध्यापक पद नौ ख (९**  
**ख) तहको खुला र आन्तरिक प्रतियोगितात्मक परीक्षाको पाठ्यक्रम**  
**एवं परीक्षायोजना**

यस पाठ्यक्रम योजनालाई दुई चरणमा विभाजनगरिएको छ :

**प्रथम चरण :-** लिखित परीक्षा (Written Examination)

पूर्णाङ्क :- २००

**द्वितीय चरण :-** अन्तर्वार्ता (Interview)

पूर्णाङ्क :- ३०

**प्रथम चरण (First Phase) : लिखित परीक्षा योजना (Written Examination Scheme)**

Paper	Subject		Marks	Full Marks	Pass Marks	No. Questions & Weightage		Time Allowed
I	General Subject	Part I: Management, General Health Issues, Academic Research and Teaching-Learning Practices	50	100	40	10 × 5 = 50 (Subjective)	1.30 hrs	2.15 hrs
		Part II: Technical Subject (Relevant Subject)	50			50 × 1 = 50 (Objective Multiple Choice)	45 min	
II	Technical Subject (Relevant Subject)			100	40	7 × 10 = 70 (Long answer) 2 × 15 = 30 (Critical Analysis)		3.00 hrs
द्वितीय चरण (Second Phase)								
	Interview			30		Oral		

**द्रष्टव्य :**

- लिखित परीक्षाको माध्यम भाषा नेपाली वा अंग्रेजी अथवा नेपाली र अंग्रेजी दुवै हुन सक्नेछ ।
- प्रतिष्ठानको प्राज्ञिक सेवा अन्तर्गत समान तहका सबै समूह/सबै उपसमूहहरूको लागि प्रथमपत्रको Part I पाठ्यक्रमको विषयवस्तु एउटै हुनेछ र एकै पटक परीक्षा संचालन हुनेछ ।
- प्रथम पत्रको Part II र द्वितीयपत्रको पाठ्यक्रम समूह/उपसमूह अनुरूप फरक फरक हुनेछ ।
- प्रथम पत्रको Part II र द्वितीय पत्रको विषयवस्तु एउटै समूह/उपसमूहहरूको हकमा समान हुनेछ ।
- प्रथम पत्रको Part II र द्वितीय पत्रको परीक्षा संचालन एकै दिन फरक समयमा हुनेछ ।
- वस्तुगत बहुवैकल्पिक (Multiple Choice) प्रश्नहरूको गलत उत्तर दिएमा प्रत्येक गलत उत्तर बापत २० प्रतिशत अङ्क कटौत गरिनेछ । तर उत्तर नदिएमा त्यस बापत अङ्क दिइने छैन र अङ्क कटौत पनि गरिने छैन ।
- वस्तुगत बहुवैकल्पिक हुने परीक्षामा परीक्षार्थीले उत्तर लेख्दा अंग्रेजी ठूलो अक्षर (Capital letter) A,B,C,D मा लेख्नुपर्नेछ । सानो अक्षर (Small letter) a, b, c, d लेखेको वा अन्य कुनै सङ्केत गरेको भए उक्त उत्तर रद्द हुनेछ ।
- बहुवैकल्पिक प्रश्नहरू हुने परीक्षामा कुनै प्रकारको क्याल्कुलेटर (Calculator) प्रयोग गर्न पाइने छैन ।
- विषयगत प्रश्नहरूको हकमा एउटै प्रश्नका दुई वा दुई भन्दा बढी भाग (Two or more parts of a single question) वा एउटा प्रश्न अन्तर्गत दुई वा बढी टिप्पणीहरू (Short notes) सोध्न सकिने छ ।
- विषयगत प्रश्नमा प्रत्येक पत्र/विषयका प्रत्येक खण्डका लागि छुट्टाछुट्टै उत्तरपुस्तिकाहरू हुनेछन् । परीक्षार्थीले प्रत्येक खण्डका प्रश्नहरूको उत्तर सोही खण्डका उत्तरपुस्तिकामा लेख्नुपर्नेछ ।

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11. यस पाठ्यक्रम योजना अन्तर्गतका पत्र/विषयका विषयवस्तुमा जेसुकै लेखिएको भएतापनि पाठ्यक्रममा परेका कानून, ऐन, नियम, विनियम तथा नीतिहरू परीक्षाको मिति भन्दा ३ महिना अगाडि (संशोधन भएका वा संशोधन भई हटाईएका वा थप गरी संशोधन भई) कायम रहेकालाई यस पाठ्यक्रममा परेको सम्झनु पर्दछ ।
12. प्रथम चरणको परीक्षाबाट उत्तिर्ण भई छनौट भएका उम्मेदवारहरूलाई मात्र द्वितीय चरणको परीक्षामा सम्मिलित गराइनेछ ।
13. पाठ्यक्रम लागु मिति : २०८१/१२/०४

**Paper I: General Subject**

**Part I:**

**Section (A) - 20 Marks**

**(Management, General Health Issues, Academic Research and Teaching - Learning Practices)**

**1. Management**

- 1.1. Health care management system in Nepal and other parts of the world
- 1.2. Fundamental principles of healthcare institution and hospital management.
- 1.3. Effective hospital management principles
- 1.4. Purpose of medical and non-medical data and records
- 1.5. Ethics and responsibility of management
- 1.6. Concept of management and its application in health care including hospital
- 1.7. Management: Concept, principles, functions, scope and role, level and skills of manager
- 1.8. Planning: Concept, principles, nature, types, instruments and steps
- 1.9. Leadership: Concept, function, leadership styles, leadership and management
- 1.10. Coordination: Concept, types, techniques of effective coordination
- 1.11. Communication and counselling: Concept, communication processes and barrier to effective communication, techniques for improving communication
- 1.12. Decision making: Importance, types, rational process of decision making, problem solving techniques, improving decision making
- 1.13. Participative management: Concept, advantage and disadvantage, techniques of participation
- 1.14. Time management: Concept, essential factors and strategies for effective time management
- 1.15. Conflict management: Concept, approaches to conflict, levels of conflict, causes of conflict and strategies for conflict management
- 1.16. Stress management: Concept, causes and sources of stress, techniques of stress management
- 1.17. Change management: Concept, sources of organizational change, resistance to change, management of resistance to change
- 1.18. Appreciative inquiry: Concept, basic principle and management
- 1.19. Human resource management: Concept, functions and different aspects
- 1.20. Health manpower recruitment and development
- 1.21. Financial management: Concept, approaches, budget formulation and implementation, Auditing and topics related to fiscal administration

**2. General Health Issues**

- 2.1. Present constitution of federal republic of Nepal (including health and welfare issues)
- 2.2. Organizational structure of Ministry of Health at national/federal, regional/state, district (if applicable), municipal and village council level
- 2.3. Professional council and related regulations
- 2.4. National Health Policy
- 2.5. Health Service Act and Regulation
- 2.6. Second Long term health plan

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- 2.7. Health Management Information System, forms, indicators, annual reports
- 2.8. Human Development Indices, Sustainable Development Goals
- 2.9. Health volunteers in the national health system, its rationale, use and effectiveness
- 2.10. Local governance and community participation in health service delivery
- 2.11. Health Insurance and financing in health care
- 2.12. Alternative health care system: Ayurveda, homeopathy, Unani, Chinese etc.
- 2.13. Indigenous and traditional faith health and health practices
- 2.14. International Health Agencies: Roles and responsibilities of WHO, UNICEF, UNFPA, Inter-agency relationships, Government-agency coordination: Joint Annual Review meeting
- 2.15. Supervision, types and its usage in health sector
- 2.16. Monitoring and evaluation system in health sector
- 2.17. National Health Training Centre
- 2.18. National and International Disaster Plan, Coordination
- 2.19. Patan Academy of Health Sciences Act, Mission, Goals, Organogram
- 2.20. Scope and function of Patan Academy of Health Sciences executive bodies (senate, executive committee, academic council, faculty board, hospital management committee, subject committee), various other committees

**Section (B) - 30 Marks**

**3. Academic Research**

- 3.1 Ethics, Bio-ethics and Professionalism
- 3.2 Human dignity and Human Right
- 3.3 Benefit and Harm
- 3.4 Autonomy and Individual responsibility
- 3.5 Consent and capacity to consent
- 3.6 Privacy and confidentiality
- 3.7 Respect for humans and personal integrity
- 3.8 Non-discrimination and non-stigmatization
- 3.9 Respect for cultural diversity and pluralism
- 3.10 National Health Research Council (NHRC) and its guidelines
- 3.11 Research process: ethical research proposal development, research principles, methods and materials, conclusion/recommendation/lesson learnt, commonly used referencing styles
- 3.12 IRB/IRC forms, types, use, importance; getting IRB/IRC clearance
- 3.13 Ethics on research methodology: sample selection, sample size calculation, ensuring reliability and validity of the instruments as well as methods proposed for health research
- 3.14 Quantitative and Qualitative studies
- 3.15 Data analysis (data visualization, descriptive statistics, inferential statistics with statistical hypotheses and appropriate tools/methods for quantitative studies; theme and code generation, thematic analysis, content analysis, grounded theory for qualitative and triangulation for mixed method studies)
- 3.16 Research ethics on vulnerable and non-vulnerable population
- 3.17 Research proposal/protocol/publication:
- 3.18 Publication ethics, plagiarism including self-plagiarism

#### 4. Teaching - Learning, Assessment and Evaluation

- 4.1 Lancet Commission Report on Education of Health Professionals
- 4.2 Adult learning: Theories, principles, use, importance and outcomes, Andragogy vs. Pedagogy
- 4.3 Conventional teaching - learning: Didactic lectures, Teacher centred approaches, use and importance
- 4.4 Surface learning, deep learning and metacognition
- 4.5 Integrated teaching: Genesis, use, importance and outcomes
- 4.6 Problem-based learning: Genesis, use, importance and outcomes
- 4.7 SPICES model its use, importance and outcomes
- 4.8 Socialization, self-directed learning, mentoring, role model
- 4.9 Community orientation/community posting, re-orientation of medical education camp, community based learning and community engaged teaching-learning methods/models, use, importance and outcomes
- 4.10 Outcome Based Education (Competency-based Medical/Health Professions Education): Genesis, use, importance and outcomes
- 4.11 Experiential learning, Reflective practice, Feedback and feed-forward, Situated learning, Co-operative learning, Communities of practice
- 4.12 Assessment of students
  - 4.12.1 Blueprinting (Table and specification) : use, importance and outcomes
  - 4.12.2 Bloom's taxonomy of cognitive, psychomotor and affective domains, use and importance
  - 4.12.3 Diagnostic, Formative, Summative and Professional exams
- 4.13 Assessment of knowledge: Selection methods like Multiple Choice Questions, Extended Matching Items and supply methods like Short Answer Question, Problem Based Question, Long Answer Question with or without model answers and marking schemes, unstructured, semi-structured and structured viva-voce examination, advantages and limitations, use and importance, outcomes and its use in quality control
- 4.14 Assessment of performance (in-vitro): Direct observation of skills in the simulated setting, lab, ward etc. with or without checklist, Objective Structured Practical Examination, Objective Structured Clinical Examination, Standardized patients, use and importance, analysis, quality assurance, outcomes and its use in quality control
- 4.15 Assessment of performance (in-vivo): Mini-Clinical Evaluation Exercise (Mini-CEX), Direct Observation of Procedural Skills (DOPS), Case-Based Discussion (CbD), OSATS/ PBA, Multi-Source feedback (360 degree evaluation) use and importance for competency based health professions education, analysis, quality assurance, outcomes and its use in quality control
- 4.16 Assessment of observable behaviours in small groups e.g. Problem Based Learning sessions, Community Based Learning and Education sessions, Clinical clerkship rotations
- 4.17 Evaluation: Difference between assessment and evaluation, theory of change and its use in health professions education, process and outcome evaluation, qualitative, quantitative and mixed methods used in evaluation of health professions education

**Paper I**  
**Part II: Technical Subject**  
**Section (C) - 25 Marks**  
**Emergency and General Practice**

1. **Applied Basic Sciences**
  - 1.1 Applied anatomy
  - 1.2 Applied Physiology
  - 1.3 Applied Pathology
  - 1.4 Applied Pharmacology
  - 1.5 Applied immunology
  - 1.6 Applied biostatistics
  - 1.7 Applied research methods
  - 1.8 Applied Molecular biology and genetics
2. **Knowledge of outpatient department**
  - 2.1 Initial assessment with logical approach to undifferentiated illness.
  - 2.2 Impact of illness in the context of the family and community
  - 2.3 Sensitive to psychosocial issues related to presentation
  - 2.4 Basic diagnostics and management of chronic illness eg diabetes, hypertension, asthma, COPD, APD , anxiety/depression
3. **Medicine**
  - 3.1 Chest pain (acute and chronic)
  - 3.2 Palpitations
  - 3.3 Shortness of breath (acute, intermittent and chronic)
  - 3.4 Wheezing/Stridor
  - 3.5 Haemoptysis
  - 3.6 Cough
  - 3.7 Cyanosis
  - 3.8 Swelling of body parts
  - 3.9 Dyspepsia
  - 3.10 Reflux
  - 3.11 Haematemesis and malaena
  - 3.12 Upper and lower abdominal pain (acute and chronic)
  - 3.13 Diarrhoea
  - 3.14 Vomiting
  - 3.15 Abdominal distension
  - 3.16 Constipation
  - 3.17 jaundice
  - 3.18 Dysuria
  - 3.19 Haematuria
  - 3.20 Impotence
  - 3.21 Confusion

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- 3.22 Coma
- 3.23 Headache
- 3.24 Convulsions
- 3.25 Syncope
- 3.26 paralysis
- 3.27 paraesthesia
- 3.28 Weakness
- 3.29 Fever
- 3.30 Anorexia
- 3.31 Fatigue
- 3.32 Myalgia
- 3.33 Itch
- 3.34 Rash
- 3.35 Abnormal bleeding
- 3.36 Swollen glands
- 3.37 Joint swelling
- 3.38 Joint pain
- 3.39 Thyroid disease
- 3.40 Diabetes
- 3.41 Tuberculosis
- 3.42 Drug related problem -iatrogenic, poisoning, or abuse including alcohol/smoking
- 3.43 Anaemia
- 3.44 Depression
- 3.45 Hypertension
- 3.46 Spinal dysfunction
- 3.47 Urinary tract infection
- 3.48 Holistic management of patients with HIV/AIDS
- 3.49 palliative care

4. **Paediatrics**

- 4.1 Acute Life Threatening Problems
  - 4.1.1 Stridor /Airway compromise (Croup/epiglottitis)
  - 4.1.2 Respiratory distress and potential respiratory failure (severe ARI, Asthma)
  - 4.1.3 Circulatory failure/shock including Sepsis and dehydration
  - 4.1.4 Altered Sensorium including Meningitis/ encephalitis / encephalopathies (hepatic, uraemic, hypertensive)
  - 4.1.5 Seizures and status epilepticus
  - 4.1.6 Congestive heart failure
  - 4.1.7 Supraventricular tachycardia
  - 4.1.8 Acute renal failure
  - 4.1.9 Bleeding disorders
  - 4.1.10 Diabetic Ketoacidosis
  - 4.1.11 Acute Abdominal Pain (distinguish medical and surgical causes)
- 4.2 Common Febrile Illness
  - 4.2.1 ARI ( including Pertussis)

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- 4.2.2 Diarrheal diseases (viral, bacterial, Parasitic)
- 4.2.3 Urinary Tract Infection
- 4.2.4 Septicemia/Bacteremia
- 4.2.5 Enteric fever
- 4.2.6 Acute tonsillitis
- 4.2.7 Tuberculosis (TB)
- 4.2.8 Infective hepatitis
- 4.3 Cough - including Asthma/Bronchitis/Bronchiolitis
- 4.4 Oedema-including renal (nephritic syndrome, nephritis), Kwashiorkor, cardiac
- 4.5 Chronic abdominal pain
- 4.6 Jaundice
- 4.7 Seizure disorders
- 4.8 Anemia and blood dyscrasias including Leukemias (recognize and refer)
- 4.9 Arthritis (septic arthritis, osteomyelitis, Juvenile Rheumatoid arthritis)
- 4.10 Skin disease/rashes (eg; scabies)
- 4.11 Common eye problems (eg, conjunctivitis)
- 4.12 Common ear problems (eg, otitis media)
- 4.13 Dehydration
- 4.14 Certain diseases can present in different ways, so specific attention should be paid to
  - 4.14.1 Diabetes mellitus
  - 4.14.2 Hypothyroidism
  - 4.14.3 TB
  - 4.14.4 HIV/AIDS

**5. Dermatology**

The general practice doctor will be able to manage the following common skin conditions:

- 5.1 Bacterial : Superficial bacterial infections, Skin TB, Leprosy
- 5.2 Viral: Herpes simplex, Herpes Zoster, Wart, Molluscum contagiosum
- 5.3 Fungal: Dermatophyte, Candida, Tinea versicolor, Deep Fungal infection
- 5.4 Parasites: Scabies, Pediculosis, Leishmaniasis
- 5.5 Approach : Systemic Causes
  - 5.5.1 Skin Causes – Infective (e.g. Scabies), Urticaria, Dermatitis Herpetiform, Lichen Planus
- 5.6 Common Skin Problems: Eczema/Dermatitis, Acne, Psoriasis, Drug eruption, Erythema multiforme, Erythema, Nodules, Purpura, Bullous diseases
- 5.7 Skin Ulcers: Hair and Nail Disorders:
  - 5.7.1 Alopecia, Onycholysis, Paronychia
  - 5.7.2 Pigmented Skin Lesion including Melanoma.
  - 5.7.3 Common Lumps and Bumps including Skin Cancers:
  - 5.7.4 Warts, Keratoacanthoma, Basal Cell, Squamous Cell, Carcinoma
- 5.8 Sexually transmitted disease
  - 5.8.1 Clinical examination and investigation and basic treatment of STD

**6. Psychiatry**

- 6.1 Anxiety including Panic and phobic disorders
- 6.2 Depression



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- 6.3 Conversion/Dissociative disorder
- 6.4 Psychosis
- 6.5 Bipolar mood disorder
- 6.6 Somatic presentations- including pseudo-seizures and multi- symptomatic patients
- 6.7 Substance Related Disorder
- 6.8 Concept and simple practice of non -pharmacological approaches to mental health problems
- 6.9 Common conditions of Primary Care
  - 6.9.1 Anxiety
  - 6.9.2 Depression
  - 6.9.3 Somatic Presentation of mental distress
  - 6.9.4 Alcohol and substance misuse
  - 6.9.5 Chronic Tiredness
  - 6.9.6 Sleep disturbances
- 6.10 Health Promotion and support in chronic mental illness
  - 6.10.1 Monitoring and follow- up in patient with chronic mental illness
  - 6.10.2 Social support for patient and their family
  - 6.10.3 Referral to appropriate specialist care
- 6.11 Stage of life issues
  - 6.11.1 Adjustment disorders and chronic physical illness, disability
  - 6.11.2 Dementia
  - 6.11.3 Dying and bereavement
- 7. **Emergency Medicine**
  - 7.1 Develops systematic approach to undifferentiable presentation (unconscious patients, chest pain; abdominal pain, dyspnea, etc.)
  - 7.2 Organize and manage emergency services
  - 7.3 Use emergency equipment and supplies available in Nepal
  - 7.4 Develop knowledge about the Emergency Drugs particularly analgesia
- 8. **Anaesthesia**
  - 8.1 Local anesthesia and regional blocks
  - 8.2 Pain management Intravenous fluid management(Pre and post surgery)
  - 8.3 Airway management using facemask, oral airway and intubation
  - 8.4 Regional anesthetic blocks, spinal, epidural and peripheral
- 9. **Surgery**
  - 9.1 **Skin and subcutaneous tissue**
    - 9.1.1 Diagnosis and management of inflammatory condition of skin like cellulites, boils, carbuncle, etc.
    - 9.1.2 Diagnosis and excision of sebaceous cysts, lipomas, etc
    - 9.1.3 Diagnosis and management of squamous cell carcinoma, basal cell carcinoma and malignant melanoma
  - 9.2 **Burns**
  - 9.3 **Lymph Nodes**
    - 9.3.1 Describe the differential diagnosis of lymph node enlargement

**9.4 Arterial disorders**

- 9.4.1 Diagnose acute limb ischaemia
- 9.4.2 Diagnose and manage dry gangrene
- 9.4.3 Diagnose and manage DVT

**9.5 Salivary gland**

- 9.5.1 Diagnosis and management of parotid and submandibular abscess
- 9.5.2 Differential diagnosis of parotid and submandibular lump
- 9.5.3 Differential diagnosis of parotid and submandibular lump (biopsy is inappropriate)

**9.6 Thyroid**

- 9.6.1 Differential diagnosis of solitary thyroid nodule
- 9.6.2 Features of nodular goiter, its complications and indications for surgery
- 9.6.3 Features of thyrotoxicosis, its complications and indications for surgery
- 9.6.4 Management of hypothyroidism

**9.7 Breast**

- 9.7.1 Method of Breast self examination
- 9.7.2 Differential diagnosis of breast lump
- 9.7.3 Triple investigation
- 9.7.4 Principles of management of breast carcinoma
- 9.7.5 Differential diagnosis of nipple discharge and indication for surgery
- 9.7.6 Breast pain

**9.8 Upper GI Tract**

- 9.8.1 Dysphagia : differential diagnosis, Investigations required
- 9.8.2 Principle of management of oesophageal carcinoma,
- 9.8.3 Gastro-oesophageal reflux disease: medical management
- 9.8.4 Peptic ulcer disease: symptomatology, indications for endoscopy, medical management, complications and indications for surgery.
- 9.8.5 Management of Ulcer GI Bleeding
- 9.8.6 Management of Gastric carcinoma (Operative details not required)

**9.9 Hepatobiliary**

- 9.9.1 Jaundice : Pathophysiology, differential diagnosis
- 9.9.2 Liver abscess
- 9.9.3 Tumors of liver : differential diagnosis
- 9.9.4 Gallstone disease and its complications

**9.10 Pancreas**

- 9.10.1 Acute pancreatitis: aetiology, definitions of mild and severe pancreatitis, management, complications and indications for surgery
- 9.10.2 Chronic pancreatitis

**9.11 Small Intestine**

- 9.11.1 Features of small bowel obstruction, its differential diagnosis and management
- 9.11.2 Appendicitis, appendicular mass and appendicular abscess

**9.12 Large bowel/Rectum and Anal Canal**

- 9.12.1 Features of large bowel obstruction and its differential diagnosis
- 9.12.2 Bleeding per rectum, differential diagnosis
- 9.12.3 Hemorrhoids including complications

पाटन स्वास्थ्य विज्ञान प्रतिष्ठान सेवाआयोग  
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9.12.4 Perianal abscess

9.13 **Hernia**

9.13.1 Acute urinary retention

9.13.2 Kidney Infection

9.13.3 Scrotal swelling: differential diagnosis and investigation

10. **Orthopaedics**

10.1 Non- Traumatic condition:

10.1.1 Infective condition : Most important, Acute infection: Acute osteomyelitis; Acute septic arthritis; Chronic osteomyelitis; Tubercular infections including spine

10.1.2 Degenerative condition and office orthopaedics

10.2 Approach to diagnosis and conservative management where possible, with referral if possible and benefit from orthopedic consultation.

10.2.1 Osteoarthritis

10.2.2 Gout/Pseudogout

10.2.3 Acute and Chronic low back and cervical pain

10.2.4 Regional Musculo-skeletal condition Shoulder, Elbow, Wrist, Hip, Knee, Ankle

10.3 Other Rarer Condition

10.3.1 Congenital Deformities

10.3.2 Neoplastic condition

10.3.3 Metabolic and other condition

10.3.4 Auto-immune diseases

11. **Obstetrics & Gynaecology**

12. **Family Planning**

13. **Ultrasound**

13.1 The different components of Ultrasound equipment and their function

13.2 Take proper care of the Ultrasound equipment including sterilization of transducers

13.3 Identify artifacts and their usefulness and those that degrade the ultrasound image

13.4 The ultrasound orientation of the image, scanning techniques and preparation of the patients

13.5 Identify key obstetrics, medical and surgical condition on ultrasound

14. **Dentistry**

14.1 common dental diseases

14.2 Manage common dental problems

14.3 Recognize and manage acute dental and periodontal conditions.

14.4 Temporo- mandibular joint dislocation

14.5 Post dental extraction bleeding

14.6 Gingivitis

14.7 Periodontitis

14.8 Dental caries

14.9 Precancerous condition

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**Section (D) - 25 Marks**  
**Palliative Care**

**1. Introduction**

- 1.1 Principles of Palliative Care
- 1.2 WHO definition
- 1.3 History of Palliative care
- 1.4 Global situation of palliative care
- 1.5 End of life care

**2. Ethical issues in palliative care**

- 2.1 Principles of ethical decision making
- 2.2 Giving iv fluids/ non-enteral nutrition
- 2.3 Prognostication ( " How long I have left?")
- 2.4 Collusion
- 2.5 Resuscitation
- 2.6 Competence/ capacity
- 2.7 Euthanasia/ physician assisted suicide

**3. Communication in palliative care**

- 3.1 Aims of good therapeutic communication
- 3.2 Barriers to effective communication
- 3.3 Breaking Bad news
- 3.4 Handling difficult questions
- 3.5 Talking about death and dying

**4. Pain management**

- 4.1 Concept of total pain
- 4.2 Classification of physical pain
- 4.3 Assessment of pain
- 4.4 Principles of pain management
- 4.5 Analgesic: non-opioids
  - Opioids : drugs, dosing, toxicity, switching
- 4.6 Analgesic for neuropathic pain
- 4.7 Non-pharmacological methods of pain management

**5. Gastrointestinal symptoms**

- 5.1 Oral problems
- 5.2 Nausea and vomiting
- 5.3 Constipation
- 5.4 Diarrhea
- 5.5 Intestinal obstruction
- 5.6 Hiccup
- 5.7 Anorexia/cachexia
- 5.8 Ascitis
- 5.9 Bowel stoma care

5.10 GI Bleeding

**6. Respiratory symptoms**

6.1 Breathlessness

6.2 Cough

**7. Mental symptoms**

7.1 Anxiety

7.2 Depression

**8. Management of Non-malignant disease in palliative care**

**9. Emergencies in palliative care**

9.1 Extreme pain

9.2 Extreme breathlessness

9.3 Spinal cord compression

9.4 Superior vena caval syndrome

9.5 Hypercalcaemia of malignancy

9.6 Situational emergencies

**10. End of life care**

10.1 Principles of “dying well”

10.2 Care in the last forty-eight hours

**11. Wound care**

**12. Skin care**

**13. Oral care**

**14. Care of the caregivers**